



ARCHITECTURAL IMPROVEMENT APPLICATION
The Vineyard at Twelve Stones
REVIEW & REQUEST FORM

DATE OF REQUEST: _____

LOT OWNER(S): _____

ADDRESS: _____ **Phone#** _____

Nature of Improvement: _____

Location – Dimensions – Color (if applicable): _____

Construction Material (if applicable): _____

Name of Contractor: _____

The plans and specifications showing the nature, kind, shape, height, materials an location of same must be attached to this application, and all signature blanks must be complete. If approved, I agree to build in accordance with this application and the attached plans and specifications. I also agree to take full responsibility in the upkeep and care of this project and the HOA is NOT responsible for any maintenance or repairs for the project.

Homeowner Signature: _____ **Date:** _____

Homeowner Signature: _____ **Date:** _____

NEIGHBOR # 1 COMMENTS (APPROVE / DISAPPROVE) Circle One

NAME(s): _____

ADDRESS: _____

If approved, I (or we) have no objection to the above listed homeowner building in accordance with this application and the attached plans and specifications.

SIGNATURE: _____ DATE: _____

SIGNATURE: _____ DATE: _____

NEIGHBOR # 2 COMMENTS (APPROVE / DISAPPROVE) Circle One

NAME(s): _____

ADDRESS: _____

If approved, I (or we) have no objection to the above listed homeowner building in accordance with this application and the attached plans and specifications.

SIGNATURE: _____ DATE: _____

SIGNATURE: _____ DATE: _____

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**THIS SECTION FOR INTERNAL USE ONLY
ARCHITECTURAL REVIEW COMMITTEE APPROVAL**

Approval Date: _____ Signature: _____
Signature: _____
Signature: _____

ARCHITECTURAL REVIEW COMMITTEE DENIAL

DATE DENIED: _____ REASON(S) DENIED: _____

Signature: _____
Signature: _____
Signature: _____

DELIVER OR EMAIL COMPLETED FORM TO:

**HOA Secretary ONLY or
Scan it and send to the HOA email**

Email: hoavineyard12suzyb@gmail.com